

PLAINTIFF EXHIBIT 5

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ACORD**EVIDENCE OF COMMERCIAL PROPERTY INSURANCE**DATE (MM/DD/YYYY)
10/25/2012

THIS EVIDENCE OF COMMERCIAL PROPERTY INSURANCE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE ADDITIONAL INTEREST NAMED BELOW. THIS EVIDENCE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS EVIDENCE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE ADDITIONAL INTEREST.

PRODUCER NAME CONTACT PERSON AND ADDRESS Fairmont Insurance Brokers, LTD. 1600 60th Street Brooklyn NY 11204 FAX (718) 256-9062 E-MAIL ADDRESS: Mordyl@fairmontins.com		PHONE (718) 232-3300		COMPANY NAME AND ADDRESS Chubb Custom Insurance Company/Foremost Insu 100 village CT ste 101 Hazlet NJ 07730-1548		NAIC NO:
CODE:		SUB CODE:		IF MULTIPLE COMPANIES, COMPLETE SEPARATE FORM FOR EACH		
AGENCY CUSTOMER ID #: 00021463		POLICY TYPE Commercial Property				
NAMED INSURED AND ADDRESS Long Beach Road Holdings LLC PO Box 568 Yonkers NY 10710		LOAN NUMBER		POLICY NUMBER 99773470-00		
ADDITIONAL NAMED INSURED(S)		EFFECTIVE DATE 4/21/2012		EXPIRATION DATE 4/21/2013		CONTINUED UNTIL TERMINATED IF CHECKED
THIS REPLACES PRIOR EVIDENCE DATED:						

PROPERTY INFORMATION (Use REMARKS on page 2, if more space is required) ☒ BUILDING OR ☐ BUSINESS PERSONAL PROPERTY

LOCATION/DESCRIPTION
Loc# 00001/Bldg# 00001, 312 Long Beach Road
Island Park, NY 11558

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS EVIDENCE OF PROPERTY INSURANCE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

COVERAGE INFORMATION		PERILS INSURED	BASIC	BROAD	<input checked="" type="checkbox"/> SPECIAL	
COMMERCIAL PROPERTY COVERAGE AMOUNT OF INSURANCE: \$		840,000 DED: 2,500				
<input checked="" type="checkbox"/> BUSINESS INCOME <input type="checkbox"/> RENTAL VALUE	YES	NO	N/A			
BLANKET COVERAGE	<input checked="" type="checkbox"/>			IF YES, LIMIT: 73,200	Actual Loss Sustained; # of months:	
TERRORISM COVERAGE	<input checked="" type="checkbox"/>			IF YES, Indicate value(s) reported on property identified above: \$		
IS THERE A TERRORISM-SPECIFIC EXCLUSION?	<input checked="" type="checkbox"/>			Attach Disclosure Notice / DEC		
IS DOMESTIC TERRORISM EXCLUDED?	<input checked="" type="checkbox"/>					
LIMITED FUNGUS COVERAGE	<input checked="" type="checkbox"/>			IF YES, LIMIT:	DED:	
FUNGUS EXCLUSION (If "YES", specify organization's form used)	<input checked="" type="checkbox"/>					
REPLACEMENT COST	<input checked="" type="checkbox"/>					
AGREED VALUE	<input checked="" type="checkbox"/>					
COINSURANCE	<input checked="" type="checkbox"/>			IF YES, 80%		
EQUIPMENT BREAKDOWN (If Applicable)	<input checked="" type="checkbox"/>			IF YES, LIMIT:	DED:	
ORDINANCE OR LAW - Coverage for loss to undamaged portion of bldg	<input checked="" type="checkbox"/>					
- Demolition Costs	<input checked="" type="checkbox"/>			IF YES, LIMIT:	DED:	
- Incr. Cost of Construction	<input checked="" type="checkbox"/>			IF YES, LIMIT:	DED:	
EARTH MOVEMENT (If Applicable)	<input checked="" type="checkbox"/>			IF YES, LIMIT:	DED:	
FLOOD (If Applicable)	<input checked="" type="checkbox"/>			IF YES, LIMIT: 400,000	DED: 1,000	
WIND / HAIL (If Subject to Different Provisions)				IF YES, LIMIT:	DED:	
PERMISSION TO WAIVE SUBROGATION IN FAVOR OF MORTGAGE HOLDER PRIOR TO LOSS						

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

ADDITIONAL INTEREST

MORTGAGEE LENDERS LOSS PAYABLE <input checked="" type="checkbox"/>	CONTRACT OF SALE Mortgage & Loss Payee	LENDER SERVICING AGENT NAME AND ADDRESS
NAME AND ADDRESS The Westchester Bank ISAOA ATIMA 2001 Central Park Avenue Yonkers, NY 10710		AUTHORIZED REPRESENTATIVE M Mishkowitz/ERICAR

FloodPro

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FEDERAL EMERGENCY MANAGEMENT AGENCY CERTIFICATION OF PROOF OF PURCHASE OF FLOOD INSURANCE			
TO: _____ <i>(Lending Institution)(Federal Agency)</i>		DATE: <u>10/25/2012</u>	
RE:(LOAN)(TRANSACTION)NO.: <u>N/A</u>			
(GRANTEE)(BORROWER)(INSURED): <u>LONG BEACH ROAD HOLDINGS</u>			
1. For title transfers:			
<input type="checkbox"/> a. This will certify that, as of this date, a Flood Insurance Policy, with mortgage clause payable to your institution, has been applied for and the premium for one year has been remitted to the servicing agent of the National Flood Insurance Program. (THE POLICY WILL BE EFFECTIVE AT THE TIME THE APPLICATION IS SIGNED BY THE PRODUCER AS A RESULT OF LENDER REQUIREMENT).			
<input type="checkbox"/> b. This will certify that, as of this date, an existing Flood Insurance Policy for the property specified below has been assigned to the mortgagor at or before the title transfer, with the mortgage clause payable to your institution.(THE POLICY WILL BE EFFECTIVE AT THE TIME TITLE TO THE PROPERTY IS TRANSFERRED TO THE PURCHASER).			
2. For other loan transactions: (select one of the below)			
<input checked="" type="checkbox"/> a. This will certify that, as of this date, a Flood Insurance Policy, with the mortgage clause payable to your institution, has been applied for and the premium for one year has been remitted to the servicing agent of the National Flood Insurance Program. (SINCE THE POLICY WAS APPLIED FOR DURING THE 30-DAY PERIOD FOLLOWING 360471 INITIAL ELIGIBILITY FOR FLOOD INSURANCE COVERAGE UNDER THE EMERGENCY/REGULAR PROGRAM. THE POLICY IS EFFECTIVE AT 12:01 AM OF THE DAY FOLLOWING THE APPLICATION DATE).			
<input type="checkbox"/> b. This will certify that, as of this date, a Flood Insurance Policy, with the mortgage clause payable to your institution, has been applied for and the premium for one year has been remitted to the servicing agent of the National Flood Insurance Program. (THE POLICY IS EFFECTIVE AT 12:01 AM OF THE 30th CALENDAR DAY FOLLOWING THE APPLICATION DATE).			
PROPERTY LOCATION 312 LONG BEACH ROAD ISLAND PARK, NY 11558		ANNUAL PREMIUM \$2,192.00	
APPLICATION DATE 10-04-2012	EFFECTIVE DATE 10-25-2012	POLICY AMOUNT APPLIED FOR(Structure) \$400,000.00	POLICY AMOUNT APPLIED FOR(Contents) \$50,000.00
FIRST MORTGAGEE THE WESTCHESTER BANK 2001 CENTRAL PARK AVENUE YONKERS, NY 10710			
ADDRESS OF AGENCY 1600 60Th St Brooklyn, NY 11204-2138			
AGENCY Fairmont Ins Brokers Ltd			
BY: _____ <i>(Authorized Signature)</i>		DATE: <u>10/25/2012</u>	